
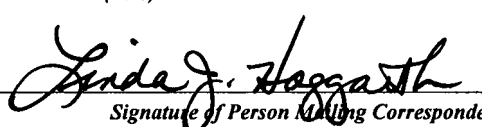
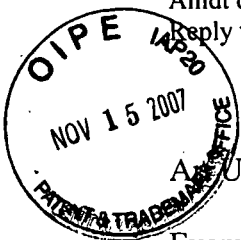


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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 19365-109957	
Applicant(s): Weber						
Application No. 10/593,210	Filing Date 9/15/2006	Examiner Brown, Peter R.	Customer No. 28886	Group Art Unit 3636	Confirmation No. 7409	
<div style="display: flex; align-items: center;"><div style="border: 2px solid black; border-radius: 50%; padding: 10px; text-align: center; margin-right: 10px;"><div style="writing-mode: vertical-rl; transform: rotate(180deg);">OIPER</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">NOV 15 2007</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">PATENT &amp; TRADEMARK OFFICE</div></div><div>REMOVABLE BOLSTER FOR ISOFIX</div></div>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	14 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$210.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1759</div> <div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div> <div><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div> <div><input type="checkbox"/> Payment by credit card. Form PTO-2038.</div>						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
<div style="font-size: 2em; margin-bottom: 5px;"></div> <div>Signature</div>			Dated: 11/12/07			
<div>Robin W. Asher, Reg. No. 41,590 Clark Hill PLC 500 Woodward Avenue Suite 3500 Detroit, MI 48226-3435 (313) 965-8300</div>			<div style="border: 1px solid black; padding: 5px;"><div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</div><div style="text-align: center;">11/13/2007. (Date)</div><div style="text-align: center;"><div style="font-size: 1.5em; margin-bottom: 5px;"></div>Signature of Person Mailing Correspondence</div><div style="text-align: center;">Linda J. Hoggarth Typed or Printed Name of Person Mailing Correspondence</div></div>			
cc:						

Appl'n No: 10/593,210  
Amdt dated November 10, 2007  
Reply to Office action of August 10, 2007



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Art Unit: 3636

Confirmation No. 7409

Examiner: Brown, Peter R.

Applicant: Weber

Serial No.: 10/593,210

Filing Date: September 15, 2006

Title: REMOVABLE BOLSTER FOR ISOFIX

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**AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

In response to the Office Action dated August 10, 2007, please amend the above-captioned patent application as set forth below.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks** begin on page 5 of this paper.